

22  
02/08/01

ISSUE SLIP STAPLE AREA (for additional Cross references)

| POSITION                  | INITIALS | ID NO. | DATE      |
|---------------------------|----------|--------|-----------|
| FEE DETERMINATION         |          |        |           |
| O.I.P.E. CLASSIFIER       |          | 43     | 1/20/01   |
| FORMALITY REVIEW          | H-S      | 86     | 02.08.001 |
| RESPONSE FORMALITY REVIEW | MD       | K9T    | 02/25/01  |

### INDEX OF CLAIMS

- ✓ ..... Rejected
- ..... Allowed
- ..... (Through numeral) ... Canceled
- ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here

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